Figure 1

Subject Information

Name: [____]   ID: [__]   Battery: [____]

Age: [_] Sex: [_] Race: [_]   Occupation: [____]

Years of Education: [_]   Hand Preference: [_]

Diagnostic Code1: [____]   Diagnostic Code2: [____]

Medications: [_____]

Other 1: [___]   Other 2: [___]   Other 3: [___]

Comments:

[_____]

[✓ Save]   [✗ Cancel]

Figure 2

Choose one of the statements below
that best describes how you feel.

HOW DO YOU FEEL RIGHT NOW?

1. Feeling active and vital; alert; wide awake.

2. Functioning at a high level, but not at peak; able to concentrate.

3. Relaxed; awake, responsive, but not at full alertness.

4. A little foggy; let down; not at peak.

5. Foggy; slowed down; beginning to lose interest in remaining awake.

6. Sleepy; woozy; prefer to be lying down; fighting sleep.

7. Almost in reverie; sleep onset soon; losing struggle to remain awake.

Figure 3

Figure 4

Figure 5

Figure 7

5 + 2 - 4 =

Figure 8

5 2 9 3 6
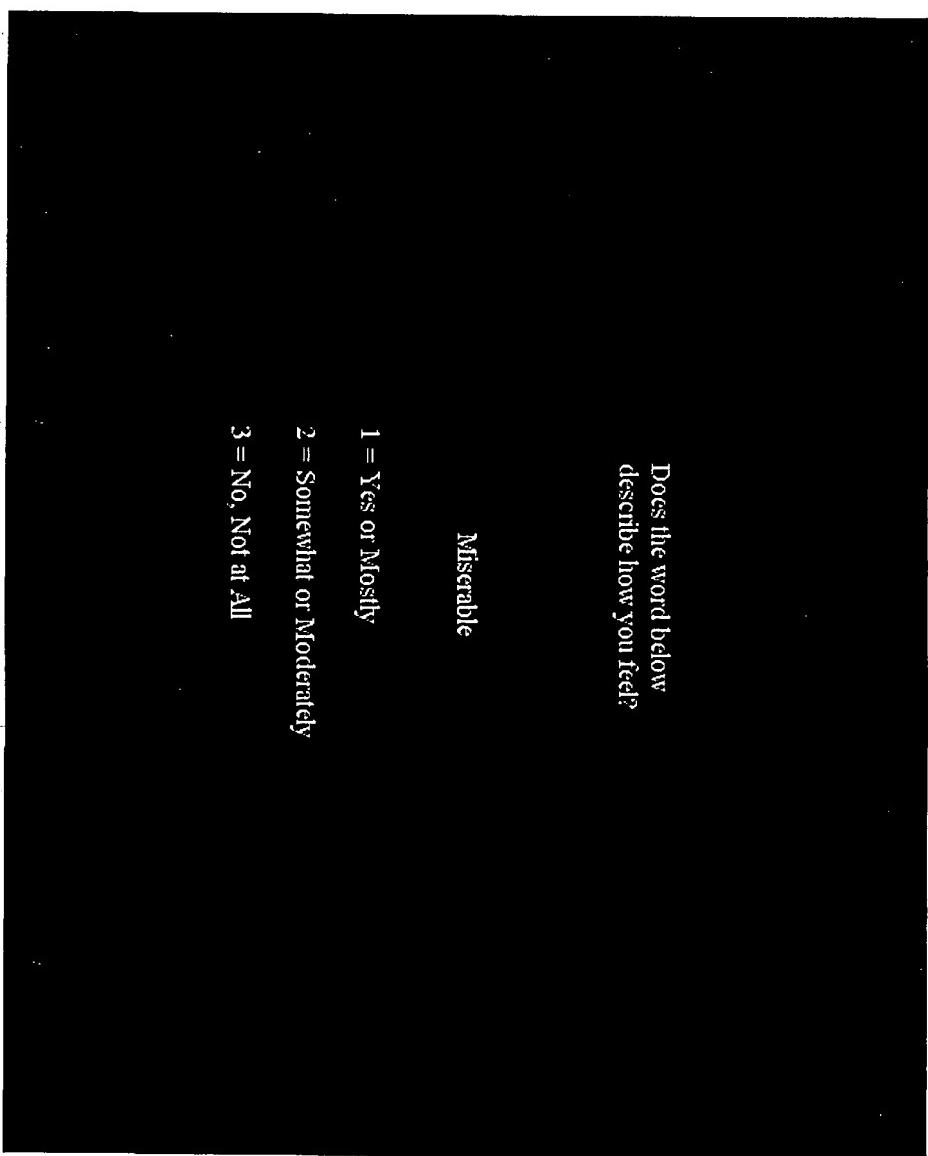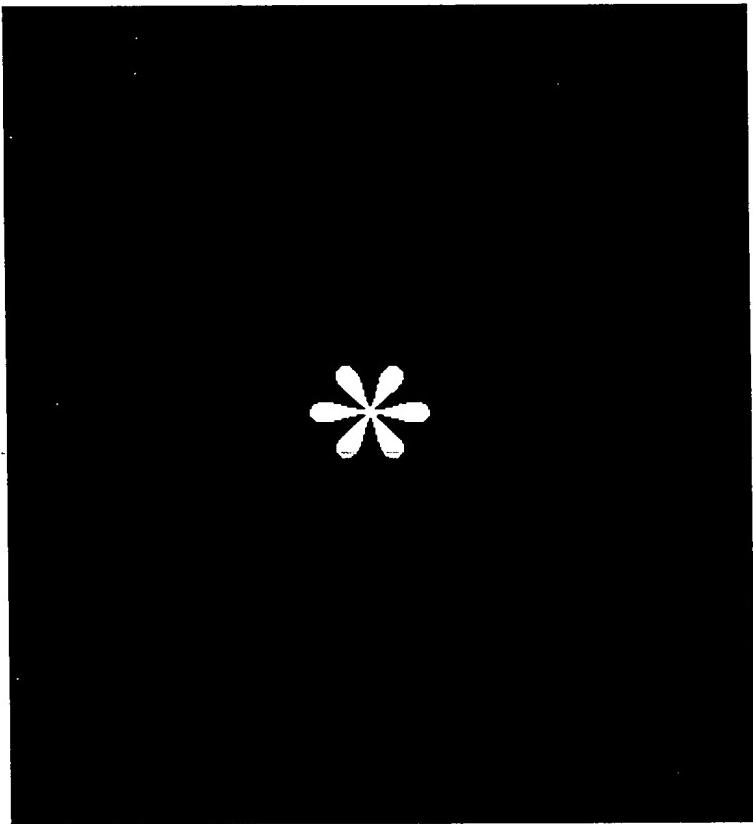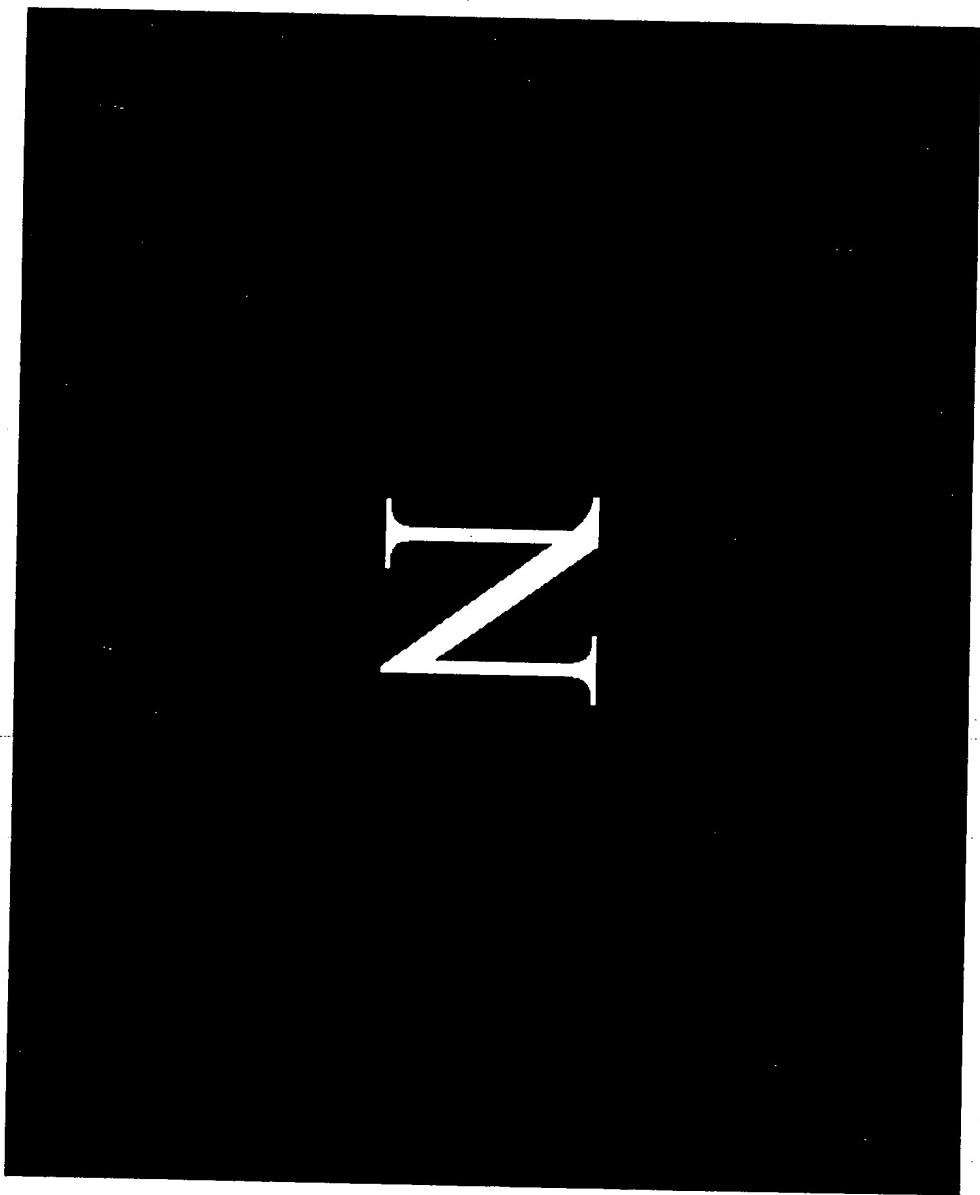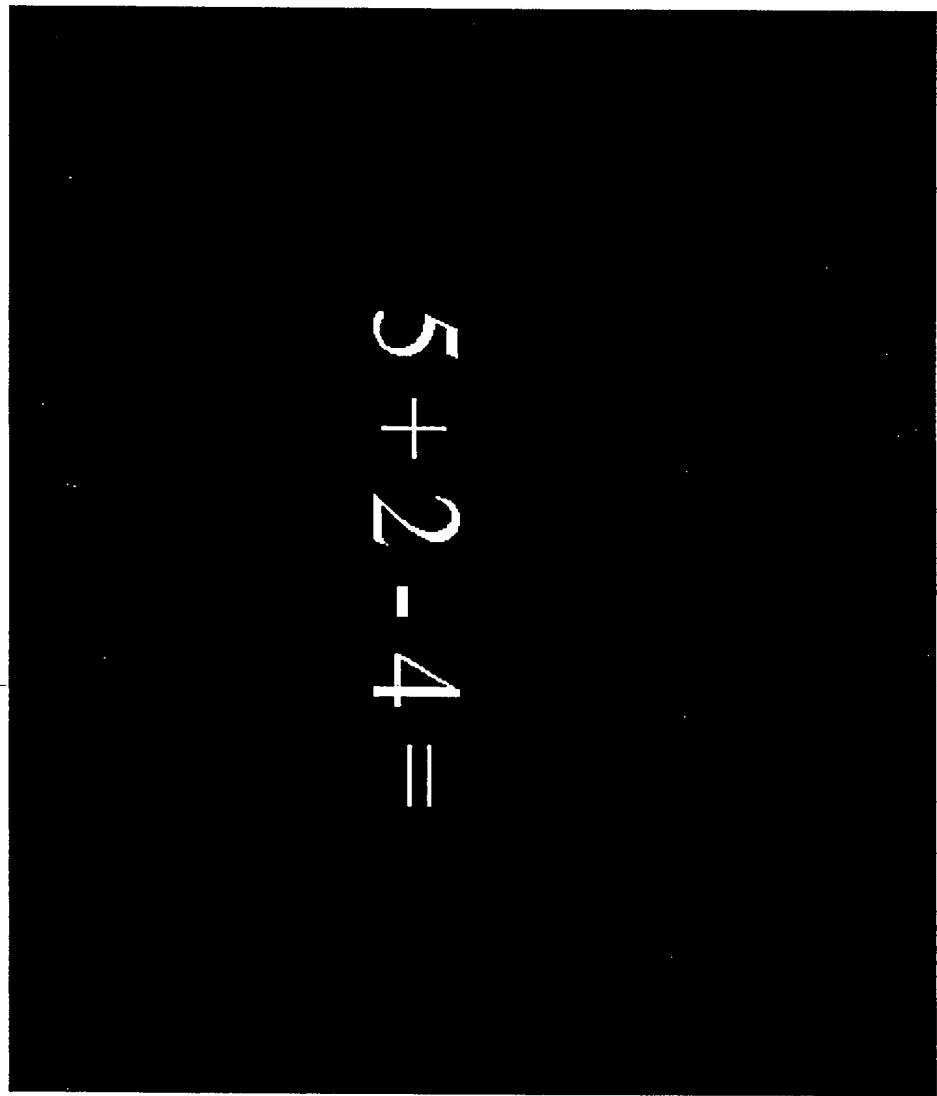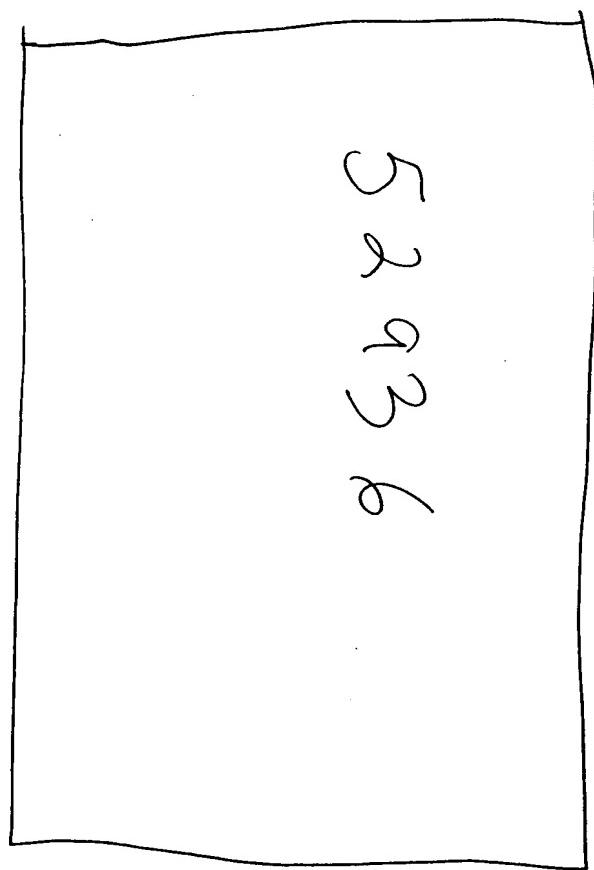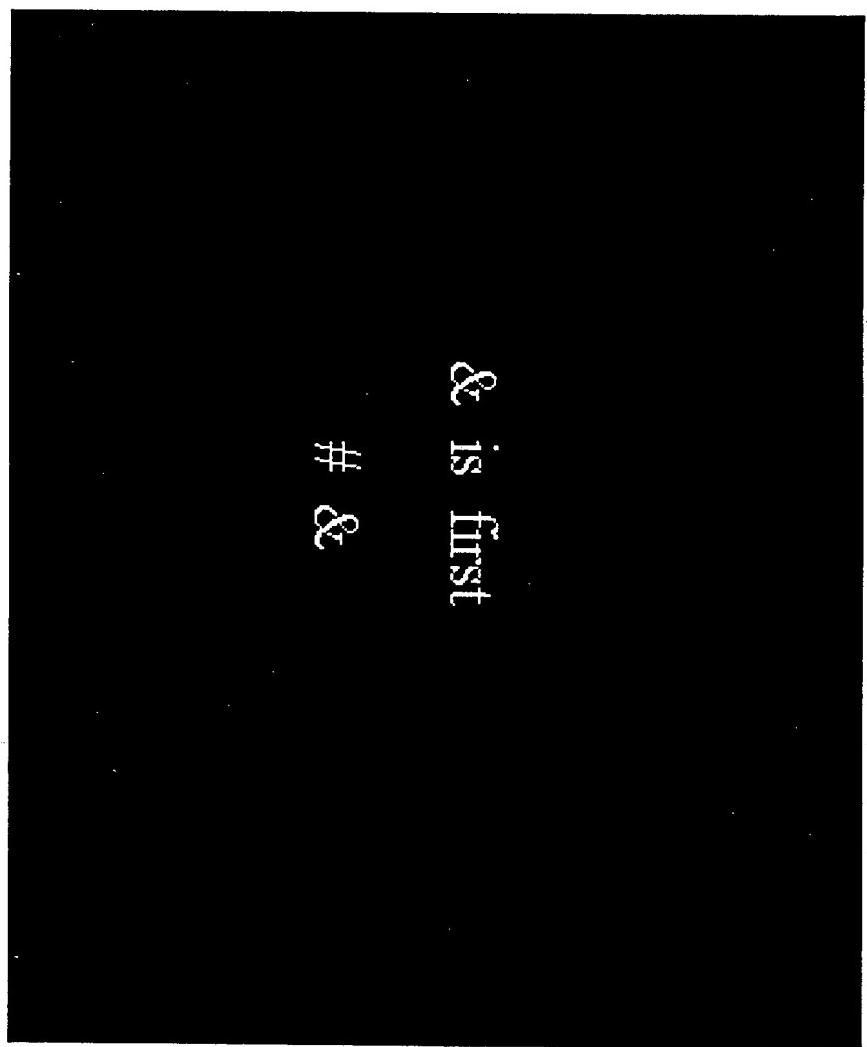
Figure 9
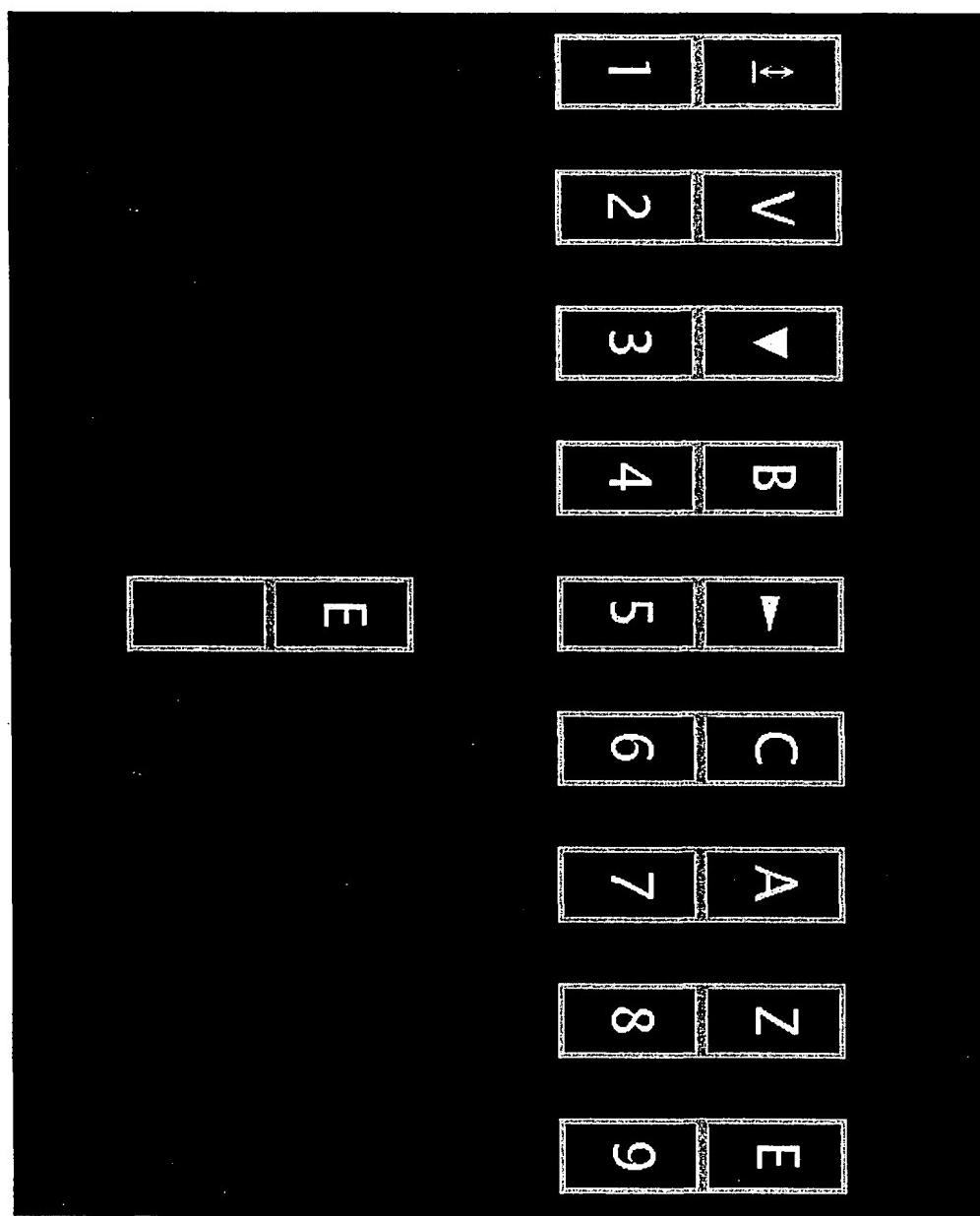
Figure 10

Figure 11

Figure 13
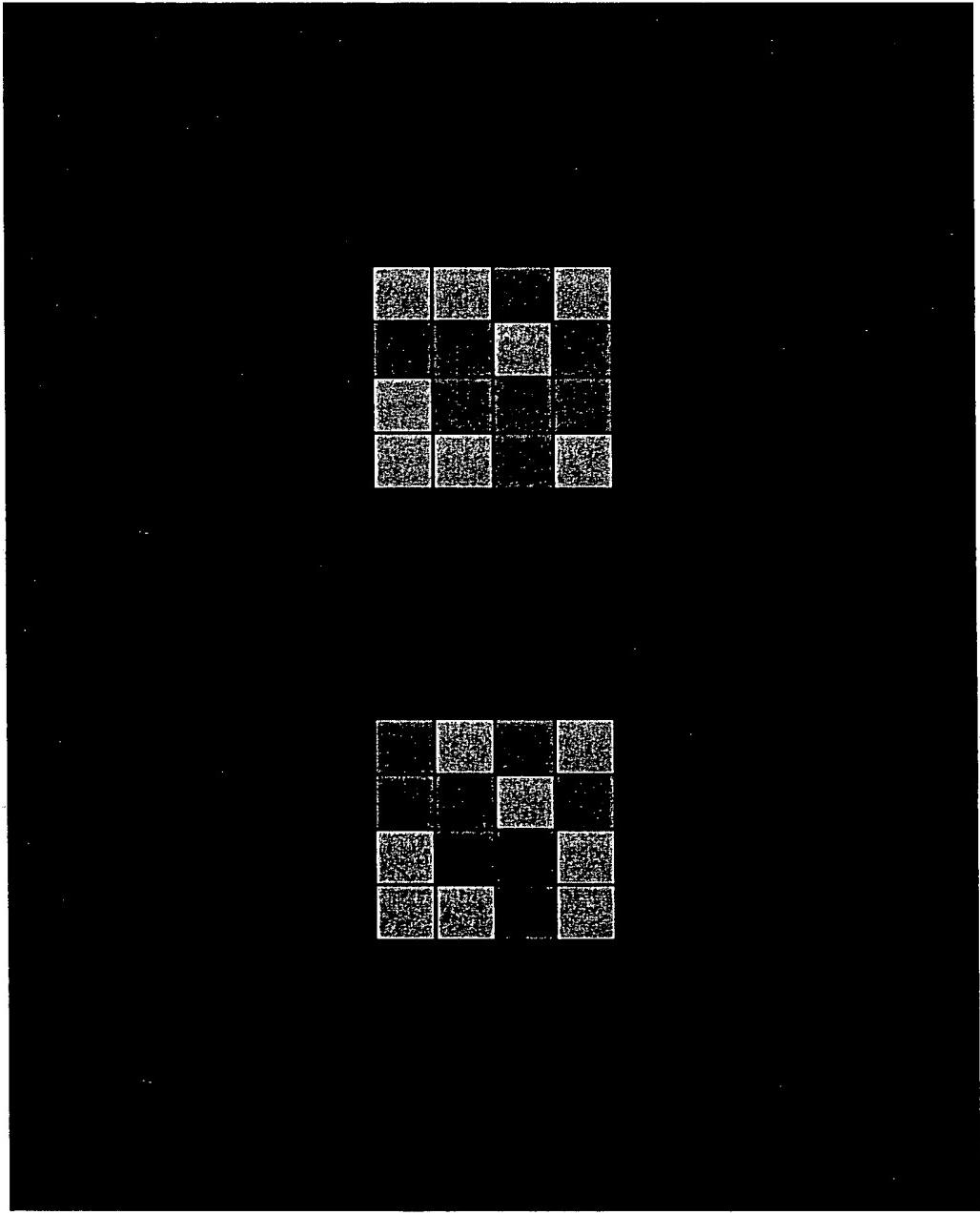
Figure 12
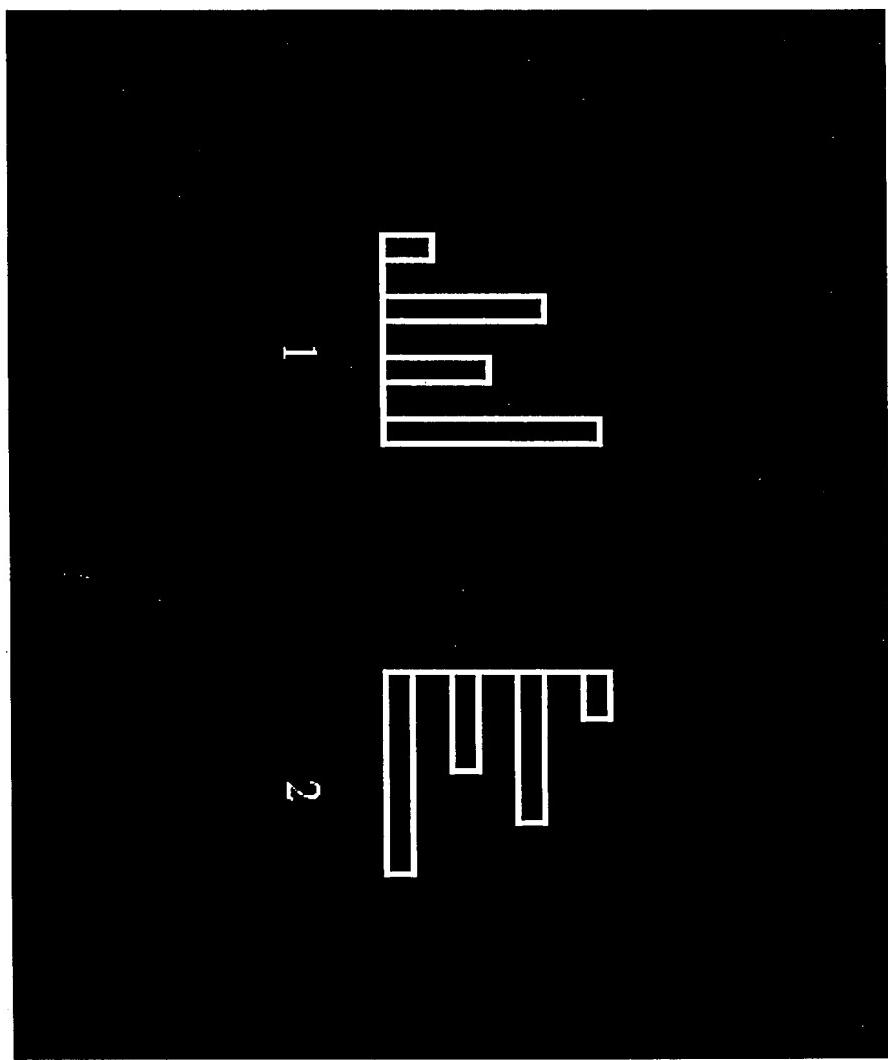
Memory Set Contains
U B R X

Press SPACE BAR [▮] to start task

J

Figure 6